

**Michigan Health Information Technology Commission
Meeting Minutes**

Date Tuesday, February 23rd, 2021, 1:00 p.m. – 3:00 p.m.

Location Virtual Meeting

Commissioner Attendance

Name	Representing	Attendance
Norman Beauchamp, M.D.	Schools of Medicine	Present
Nicholas D’Isa, co-chair	Health Plans or Other Payers	Present
Vacant	Department of Health and Human Services	Vacant
Jack Harris	Department of Technology, Mgmt., Budget	Present
Allison Brenner, PharmD	Pharmaceutical Industry	Present
Jonathon Kufahl	Hospitals	Present
Paul LaCasse, D.O.	Doctors of Osteopathic Med. and Surgery	Present
Pat Rinvelt	Purchasers or Employers	Present
Vacant	Nonprofit Health Care Corporations	Vacant
Renée Smiddy, M.S.B.A.	Consumers	Present
Heather Somand, Pharm.D.	Pharmacists	Present
Jim VanderMey	Health IT Field	Present
Michael Zaroukian, M.D., Ph.D.	Doctors of Medicine	Present

Michigan Department of Health and Human Services (MDHHS) Staff:
Chris Jackson, Erin Mobley, Olivia Barth, Kristina Dawkins

Guests:

Registration is not required to attend Health IT Commission virtual public meetings. Due to open registration, we are currently not able to capture public attendance.

Minutes: The regular Health Information Technology Commission meeting was held virtually on February 23rd, 2021 with eleven (11) commissioners in attendance.

1. Welcome and Introductions

Presented by Christopher Jackson and Nicholas D’Isa

- i. Co-Chair Nicholas D’Isa called the meeting to order at 1:00 p.m.
- ii. Christopher Jackson, MDHHS State Assistant Administrator, Policy * Planning division, provided virtual “housekeeping” guidelines

2. Commission Business

Presented by the commission Co-Chair

- i. Co-Chair D’Isa invited commissioners to provide an introduction.
- ii. Co-Chair D’Isa presented a vote for a new Co-Chair
 1. Jonathon Kufahl nominated himself, won unanimously
 2. Motion was approved by commission members

A. Review of the 9/22/2020 Minutes

- i. Co-Chair D’Isa presented a motion to approve the November 2020 meeting minutes.

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1. There were no objections from the commission and the motion passed unanimously.

3. HHS Regulatory Changes Presentation

Presented by Shreya Patel, Michigan Health Information Network

- i. Ms. Patel presented the HIPAA privacy rule proposed changes
 - a. The goal of the changes is to increase care coordination and decrease the burden on covered entities
 - b. The rule change applies to HIPAA covered entities
 - i. Previously, the privacy rule only effected business entities, but is now focused on entities interacting with patients
 - c. Main point of the change is to allow patients to have greater autonomy on their treatment schedule
 - i. Focus on interoperability
 - d. End date is currently set at December 31st, 2023
- ii. Questions
 - a. Nicholas D'Isa asked what the time frame for comment and change on proposed changes
 - i. There are 60 days to provide comments, 180 days for compliance changes, and 240 days for compliance
 - b. Renée Smiddy asked if the regulation applies to telehealth/telemedicine
 - i. Not much; it discusses what a patients rights are in office, but not does discuss digital visits

4. MDHHS 2020 Annual Report Presentation

Presented by Colin Slaughter, MDHHS Intern

- i. Mr. Slaughter presented the 4 pillars for the strategic planning of the 2020 Health IT Roadmap (page 10)
- ii. Mr. Slaughter presented the most important technology improvements considered by those polled by CedarBridge (page 16)
- iii. These improvements were focused in areas of telemedicine services, improving data quality, increase in broadband access, and access to Social Determinants of Health (SDoH)
 1. Regarding Telemedicine Services, the commission recommends supporting providers by enabling consistent telemedicine implementation and compliance policies, supporting health plans with telehealth policies, advocating for greater interoperability of systems used by telehealth providers, support information exchange within MiHIN, and using telemedicine as a tool to address health equity and access issues
 2. Regarding improving data quality, the commission recommends legislative action focused on providing resources for providers to better track, monitor, and refer patients, enable standardization of screen

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measures of SDoH, and promoting a statewide social health resource center

- iv. Regulatory changes suggested were expanding provisions for allowable witnesses, allowing advance care planning documents to be signed and witnessed using Electronic Signature, and incorporating Michigan Executive Order No. 2020-187
- v. There were no questions regarding the 2020 Annual Report
- vi. Motion to approve presented by Nicholas D'Isa, seconded by Pat Rinvelt
 - 1. Annual Report was approved and will be added to the MDHHS HIT Commission website

5. HIE Education Materials

Presented by Colin Slaughter

- i. The purpose of the Education Materials is to be educate community members on the benefits of Health IT and Health Information Exchange (HIE) networks
 - 1. Nicholas D'Isa asked whom the audience was
 - a. Christopher Jackson sated it will be added to the HIT Commission Website
 - 2. Nicholas D'Isa suggested a slide defining and visualizing what Social Determinants of Health (SDoH) are and what their benefits in this context would be
 - 3. Renée suggested improving the reach of the material and additional websites it could be posted to
 - a. Jim VanderMey agreed, Christopher Jackson will look into areas it can be added
 - b. Norman Beauchamp getting information to healthcare professionals, Pat Rinvelt would like to add this to their curriculum for health administration students

6. Update on Health IT Roadmap

Presented by CedarBridge Group

A. Project Update

- i. Donald Ross provided an update on electronic surveys
 - 1. Dawn Bonder, CedarBridge Group Managing Director, stated that, in coordination with the Michigan State Medical Society, a specialized set of questions was sent to physician organizations
 - 2. They surveys showed key findings in the areas of telemedicine, SDoH data, and identifying missing voices
 - a. Telemedicine use expanded rapidly during the COVID-19 pandemic and was recognized as an essential tool that should continue to be used and evolve
 - b. SDoH data was reported to be a priority of nearly all stakeholder groups surveyed,

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including standardizing and improving coordination of the SDoH data

- c. Missing voices are classified as stakeholders who did not respond to outreach, were unable to schedule times for interviews, and as groups that were not initially recognized during the survey period
- 3. The discovery phase of stakeholder input is completed, and the analysis and synthesis phase is beginning
 - a. ~200 survey respondents
- 4. The high-level timeline for the Roadmap Development Process was observed; currently CedarBridge and the HIT Commission are in the data analysis sector

A. Adjourn

- i. Co-Chair D'Isa made a motion to adjourn the meeting. The motion was approved unanimously, and the meeting ended at 3:00 p.m.